

An evaluation of Next Generation Sequencing for genetic diagnosis of the Primary Hyperoxalurias

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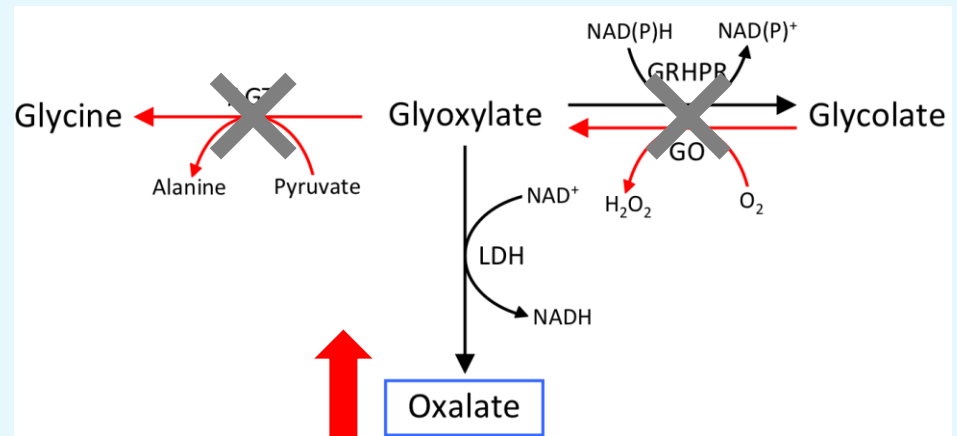
Imperial College Healthcare NHS Trust

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Primary Hyperoxaluria (PH)

- Affects ~3 in 1 million individuals
- Caused by defects in glyoxylate metabolism
- Excess glyoxylate converted to oxalate
- Oxalate excess
 - Kidney stones
 - Renal failure
 - Kidney/liver transplant
- Three associated genes
 - **PH1:** *AGXT*
 - **PH2:** *GRHPR*
 - **PH3:** *HOGA1*

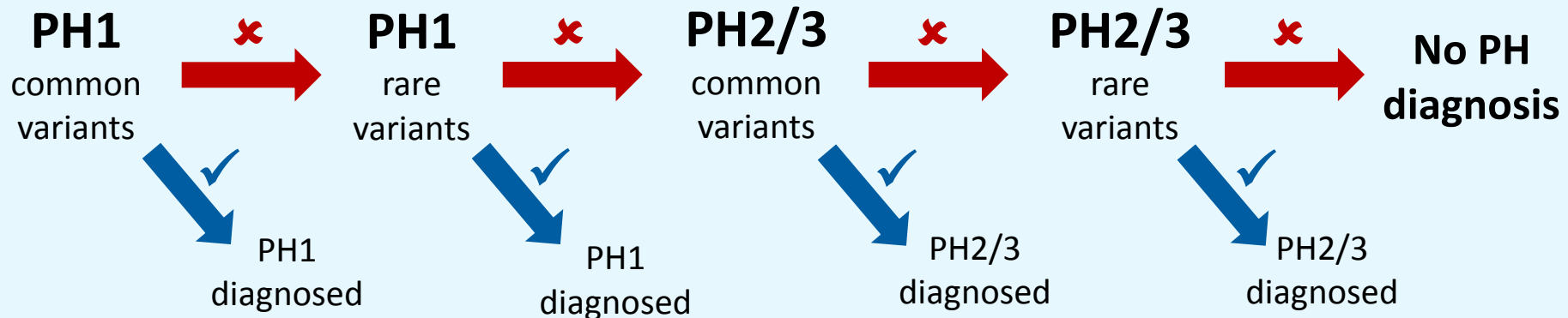


Current laboratory diagnosis

- Biochemistry (blood and urine)
- Liver biopsy enzyme analysis
- Kidney stone analysis



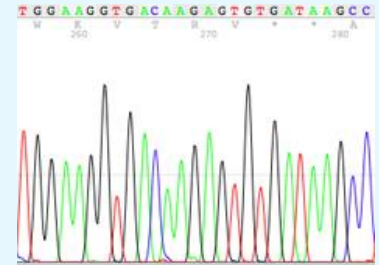
- Genetic testing to identify two disease causing mutations
- Requires one blood sample
 - Sequential diagnostic approach:



Sequencing Technologies

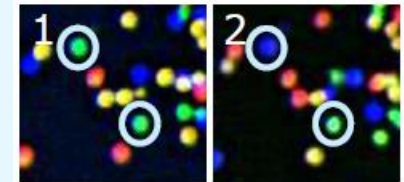
Sanger sequencing

- Traditional method for DNA sequencing
- Gene-by-gene analysis
- Widely used in UK for Clinical Diagnostics
- Labour-intensive, few samples analysed simultaneously



Next Generation Sequencing (NGS)

- Targeted methods e.g. for 3 x PH genes
- Illumina “TruSeq Custom Amplicon”
- Many samples and several genes analysed simultaneously
- Bioinformatic support required for data analysis



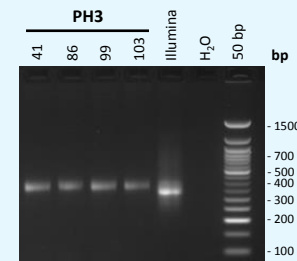
Sample analysis

- Genomic DNA from 90 patients previously diagnosed with PH
(Provided by Dr Gill Rumsby, UCLH)

Day 1 Prepare DNA samples



Days 2-3 TruSeq Custom Amplicon Protocol



Days 4-5 Determine DNA sequence using MiSeq



Days 6-7 Analyse data, identify mutations, report results



Comparing Sanger and NGS results

96.7 % agreement between methods for PH-causing variants

PH1 58 of 64 PH1 patients correctly diagnosed

- 1 patient: no previous genetic diagnosis
- 1 patient: known large gene deletion
 - cannot be detected by NGS
- 4 patients: NGS gave one incorrect variant
 - poor quality data in sections of PH1 gene

PH2 All 14 patients correctly diagnosed

PH3 All 12 patients correctly diagnosed

Additional data from NGS method

- Mutations in two different PH genes for 3 PH1 patients
 - 2 PH1 variants and 1 PH3 variant
 - Patients diagnosed with PH1
 - ➔ **Clinical impact?**
- Novel variants found in all 3 genes
 - ➔ **Assess pathogenicity**
 - 4 likely disease-causing
 - 2 likely benign

Outcomes

- Targeted NGS assay for PH developed - 90 samples analysed
- 84 cases given genetic diagnosis of PH
- 96.7 % agreement with Sanger sequencing results
- 6 novel mutations identified
- Single assay could give diagnosis in 1 week

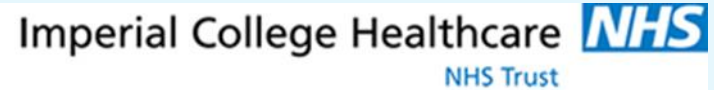
Use in Clinical Diagnostics?

- Expensive equipment
- Initial bioinformatics support vital
- Not suitable for large gene deletions
- Confirmation using traditional methods still necessary
- Cheaper and faster for analysis of several genes
- Additional information may be obtained

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